

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		6	8-17-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim		Date	
Final	Original		
1	2		
3	4		
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49	50		

Claim		Date	
Final	Original		
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99	100		

Claim		Date	
Final	Original		
101	102		
103	104		
105	106		
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149	150		

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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